## STATE OF MONTANA REQUEST AND JUSTIFICATION FOR OUT-OF-STATE TRAVEL 1) Agency Number/Name 2) Division 3) Org Number 4) Name of Employee(s) Traveling 5) Justification 6) Alternatives 7) Itinerary Destination: **Travel Dates: Hotel Name: Hotel Phone:** Details: 8) Lodging Rate Within Federal Rate? If not, enter Federal and Lodging Rates. If requesting travel advance, list amount. Federal \$ l I Yes \$ (Travel advances should be issued only on an exception basis) Lodging \$ No If rates are above the federal rate, check the items which apply: □ 1. Rates were requested and were not available at the hotel where the employee is staying; and a. Government or significantly lower rates are not available at another hotel within a reasonable distance; or □ b. It is necessary for purposes of accessibility and/or security to stay at the hotel in which the conference is being held; or c. Emergency or last minute travel arrangements preclude finding accommodations within the federal guidelines; and 2. Reimbursement at actual cost is within the agency's authorized appropriation level. 9) Estimated Cost Transportation Meals & Lodging Registration Other Total \$ \$ \$ Title 10) Submitted By Requested By Date Approval - to be Signed by Authorized Agency Personnel Supervisor Date Administrator Date Dept. Head/Designee Date A travel expense voucher form must be filed within three months after incurring the travel expenses, otherwise the right to reimbursement will be waived.